UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

BIENVENIDO P. ONG,

Plaintiff,

-against-

CVS PHARMACY,

Defendant.

25-CV-2122 (LTS)

ORDER DIRECTING IFP APPLICATION AND SIGNATURE

LAURA TAYLOR SWAIN, Chief United States District Judge:

Plaintiff brings this action *pro se*. To initiate this matter, he submitted one document that is unsigned. The document includes (1) a request for waiver of the fees to initiate this action and (2) what appears to be Plaintiff's complaint. This document is deficient. Accordingly, the Court directs Plaintiff, within 30 days of the date of this order, (1) to complete, sign, and submit the attached application to proceed *in forma pauperis* ("IFP"); and (2) to complete, sign, and submit the attached complaint form.

DISCUSSION

Under Rule 3 of the Federal Rules of Civil Procedure, "[a] civil action is commenced by filing a complaint with the court." Fed. R. Civ. P. 3. Moreover, under Rule 11(a) of the Federal Rules of Civil Procedure, "[e]very pleading, written motion, and other paper must be signed . . . by a party personally if the party is unrepresented." Fed. R. Civ. P. 11(a); *see Becker v. Montgomery*, 532 U.S. 757, 764 (2001) (interpreting Rule 11(a) to require, "as it did in John Hancock's day, a name handwritten (or a mark handplaced)").

As noted above, Plaintiff submitted an unsigned document where he provides information ordinarily included in an IFP application. Because this document is deficient, the Court directs Plaintiff to file a completed IFP application. The Court also directs Plaintiff to file a completed

complaint form, because the form he submitted is unsigned, does not include a statement of facts,

a description of Plaintiff's claims, or the relief he seeks.

CONCLUSION

The Court directs Plaintiff, within 30 days of the date of this order, to file the attached

IFP application and complaint form, as described above.

No summons or answer shall issue at this time. If Plaintiff complies with this order, the

case shall be processed in accordance with the procedures of the Clerk's Office. If Plaintiff fails

to comply with this order within the time allowed, the action will be dismissed without prejudice.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would

not be taken in good faith, and therefore in forma pauperis status is denied for the purpose of an

appeal. Cf. Coppedge v. United States, 369 U.S. 438, 444–45 (1962) (holding that appellant

demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED.

Dated:

March 25, 2025

New York, New York

/s/ Laura Taylor Swain

LAURA TAYLOR SWAIN

Chief United States District Judge

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UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

	Il name(s) of the plaintiff or petitioner applying (each person st submit a separate application)		
	,	CV	() ()
	-against-	(Enter case number and init available; if filing this with y yet have a case number or a	our complaint, you will not
(Fu	Il name(s) of the defendant(s)/respondent(s).)		
	APPLICATION TO PROCEED WITHO	OUT PREPAYING FEES (OR COSTS
I be	m a plaintiff/petitioner in this case and declare that I believe that I am entitled to the relief requested in this ma pauperis ("IFP") (without prepaying fees or costs	action. In support of this ap	plication to proceed in
1.	Are you incarcerated? Yes I am being held at:	☐ No (If "No," go	to Question 2.)
	Do you receive any payment from this institution?	Yes No	
	Monthly amount:		
	If I am a prisoner, see 28 U.S.C. § 1915(h), I have a Authorization" directing the facility where I am inc in installments and to send to the Court certified comonths. See 28 U.S.C. § 1915(a)(2), (b). I understanfull filing fee.	arcerated to deduct the filing pies of my account statemen	g fee from my account ts for the past six
2.	Are you presently employed?	☐ No	
	If "yes," my employer's name and address are:		
	Gross monthly pay or wages:		
	If "no," what was your last date of employment?		
	Gross monthly wages at the time:		
3.	In addition to your income stated above (which you living at the same residence as you received more the following sources? Check all that apply.		
	(a) Business, profession, or other self-employment(b) Rent payments, interest, or dividends	Yes Yes	☐ No ☐ No

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	(c) Pension, annuity, or life inst	1 2			Yes		No	
	(d) Disability or worker's comp	ensation paymer	nts		Yes	L	No	
	(e) Gifts or inheritances(f) Any other public benefits (u	nemployment so	ocial security		Yes	L	No	
	food stamps, veteran's, etc.)		cial security,		Yes		No	
	(g) Any other sources				Yes		No	
	If you answered "Yes" to any que money and state the amount that							of
	If you answered "No" to all of the	ne questions abov	ve, explain how	you a	re payi	ng your ex	penses:	
4.	. How much money do you have in cash or in a checking, savings, or inmate account?							
5.	. Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:							
6.	Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:							
7.	7. List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):							
8.	8. Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable:							
Declaration: I declare under penalty of perjury that the above information is true. I understand that a false statement may result in a dismissal of my claims.								
Da	ted	_	Signature					
Na	me (Last, First, MI)	_	Prison Identificat	ion # (if incarce	erated)		
Ad	dress	City	S	tate		Zip Code		
Te	lephone Number	=	E-mail Address (if	f availa	ıble)			

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

	_
Write the full name of each plaintiff	- CV
Write the full name of each plaintiff.	(Include case number if one has been assigned)
-against-	COMPLAINT
	Do you want a jury trial? ☐ Yes ☐ No
	_
Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.	

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?				
☐ Federal Question				
☐ Diversity of Citizenship				
A. If you checked Federal Question				
Which of your federal constitutional or federal statutory rights have been violated?				
B. If you checked Diversity of Citizenship				
1. Citizenship of the parties				
Of what State is each party a citizen?				
The plaintiff , , is a citizen of the State of (Plaintiff's name)				
(Plaintiff's name)				
(State in which the person resides and intends to remain.)				
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of				
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.				

If the defendant is an individual:		
The defendant, (Defendant's name)		, is a citizen of the State of
or, if not lawfully admitted for permanen subject of the foreign state of	t residence in the U	Jnited States, a citizen or
If the defendant is a corporation:	·	
The defendant,		orporated under the laws of
the State of		<u> </u>
and has its principal place of business in t	the State of	
or is incorporated under the laws of (forei	gn state)	
and has its principal place of business in		·
If more than one defendant is named in the cinformation for each additional defendant.	complaint, attach add	ditional pages providing
II. PARTIES		
A. Plaintiff Information		
Provide the following information for each p pages if needed.	laintiff named in the	e complaint. Attach additional
First Name Middle Initial	Last Name	
Street Address		
County, City	State	Zip Code
Telephone Number	Email Address (if av	vailable)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		
Defendant 2:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		
Defendant 3:					
	First Name	Last Name			
	Current Job Title (or other identifying information)				
	Current Work Address (or other address where defendant may be served)				
	County, City	State	Zip Code		

Defendant 4:				
	First Name	Last Name		
	Current leb Title (s	or other identifying information)		
	Current dot fille (C	or other identifying information)		
	Current Work Address (or other address where defendant may be served)			
	County, City	State	Zip Code	
III. STATEMEN	NT OF CLAIM			
Place(s) of occurr	ence:			
Date(s) of occurre	ence:			
FACTS:				
-	nt each defendant p	oport your case. Describe what ha personally did or failed to do that l		
			_	
			_	

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated		Plaintiff's Signature		
First Name	Middle Initial	Last Name		
Street Address				
County, City	Sta	te Zip Code		
Telephone Number		Email Address (if available)		
I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically: \Box Yes \Box No				
If you do consent to reco	If you do consent to receive documents electronically, submit the completed form with your			

complaint. If you do not consent, please do not attach the form.

Pro Se (Nonprisoner) Consent to Receive Documents Electronically

Parties who are not represented by an attorney and are not currently incarcerated may choose to receive documents in their cases electronically (by e-mail) instead of by regular mail. Receiving documents by regular mail is still an option, but if you would rather receive them only electronically, you must do the following:

- 1. Sign up for a PACER login and password by contacting PACER¹ at www.pacer.uscourts.gov or 1-800-676-6856;
- 2. Complete and sign this form.

If you consent to receive documents electronically, you will receive a Notice of Electronic Filing by e-mail each time a document is filed in your case. After receiving the notice, you are permitted one "free look" at the document by clicking on the hyperlinked document number in the e-mail. Once you click the hyperlink and access the document, you may not be able to access the document for free again. After 15 days, the hyperlink will no longer provide free access. Any time that the hyperlink is accessed after the first "free look" or the 15 days, you will be asked for a PACER login and may be charged to view the document. For this reason, you should print or save the document during the "free look" to avoid future charges.

IMPORTANT NOTICE

Under Rule 5 of the Federal Rules of Civil Procedure, Local Civil Rule 5.2, and the Court's Electronic Case Filing Rules & Instructions, documents may be served by electronic means. If you register for electronic service:

- 1. You will no longer receive documents in the mail;
- 2. If you do not view and download your documents during your "free look" and within 15 days of when the court sends the e-mail notice, you will be charged for looking at the documents;
- 3. This service does *not* allow you to electronically file your documents;
- 4. It will be your duty to regularly review the docket sheet of the case.³

¹ Public Access to Court Electronic Records (PACER) (www.pacer.uscourts.gov) is an electronic public access service that allows users to obtain case and docket information from federal appellate, district, and bankruptcy courts, and the PACER Case Locator over the internet.

 $^{^2}$ You must review the Court's actual order, decree, or judgment and not rely on the description in the email notice alone. See ECF Rule 4.3

³ The docket sheet is the official record of all filings in a case. You can view the docket sheet, including images of electronically filed documents, using PACER or you can use one of the public access computers available in the Clerk's Office at the Court.

CONSENT TO ELECTRONIC SERVICE

I hereby consent to receive electronic service of notices and documents in my case(s) listed below. I affirm that:

- 1. I have regular access to my e-mail account and to the internet and will check regularly for Notices of Electronic Filing;
- 2. I have established a PACER account;
- 3. I understand that electronic service is service under Rule 5 of the Federal Rules of Civil Procedure and Rule 5.2 of the Local Civil Rules, and that I will no longer receive paper copies of case filings, including motions, decisions, orders, and other documents;
- 4. I will promptly notify the Court if there is any change in my personal data, such as name, address, or e-mail address, or if I wish to cancel this consent to electronic service;
- 5. I understand that I must regularly review the docket sheet of my case so that I do not miss a filing; and
- 6. I understand that this consent applies only to the cases listed below and that if I file additional cases in which I would like to receive electronic service of notices of documents, I must file consent forms for those cases.

Civil case(s) filed in the Southern District of New York:

your pendir		For each case, include the	this court, so please list all of case name and docket number
Name (Last, First, N	MI)		
Address	City	State	Zip Code
Telephone Number	:	E-mail Address	
Date		Signature	

Return completed form to:

Pro Se Intake Unit (Room 200) 500 Pearl Street New York, NY 10007